



CDSS

JOHN A. WAGNER
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



ARNOLD SCHWARZENEGGER
GOVERNOR

May 26, 2010

Pauline Cravens, Director
Modoc County Department of Social Services
120 Main Street
Alturas, CA 96101

Dear Ms. Cravens:


The purpose of this letter is to approve Modoc County's 3-Year System Improvement Plan (SIP) submitted to the California Department of Social Services (CDSS) on January 28, 2010, as part of the California Child and Family Services Review (C-CFSR).

The Children's Services Outcomes & Accountability Bureau (CSOAB) has conducted an analysis of Modoc County's Quarterly County Data Reports and SIP. At this time, we concur with the direction and the overall strategies for improvement. We also concur with the county's prioritization of activities for this upcoming SIP period.

On a quarterly basis, Modoc County will continue to be contacted by Mary-Ellen Borba, your CSOAB consultant, to obtain updates on SIP implementation and county performance on all of the outcome indicators. In the event that the Quarterly County Data Report indicates a negative data trend or insufficient progress in any of the outcome indicators, including those not contained within the SIP, CDSS will contact the county to request an amendment to the SIP.

I appreciate Modoc County's commitment to the C-CFSR process and to continuous improvement of outcomes for children and families. Should you have any questions, please contact Mary-Ellen Borba at (916) 651-8120, or send an email to: chldserv@dss.ca.gov.

Sincerely,


ELLIE JONES, MSW, Chief
Children's Services Operations
and Evaluation Branch

c: Elias Fernandez, Chief Probation Officer

bc:

S. Burdue	8-12-91
M. Borba	8-12-91
Branch Files	8-12-34
Chron files	8-12-91
CSOB County Files Modoc county)	8-12-91

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Send copy of letter to

Elias Fernandez, Chief Probation Officer
Modoc County Probation Department
120-A South Main Street
Alturas, CA 96101

CDSS DOCUMENT APPROVAL SLIP

SECTION I.		DATE: February 1, 2010	
FROM: NAME: Mary-Ellen Borba DIVISION/BRANCH: CFSD, Outcomes & Accountabilities PHONE:		SUBJECT: Approval letter for Modoc County's 3-Year SIP	
ACTION REQUESTED: <input checked="" type="checkbox"/> Letter for Signature <input type="checkbox"/> Material for Approval or Review/Comment DUE DATE: CONTROL NUMBER:		BRIEF SYNOPSIS: Approval letter for Modoc County's 3-Year SIP 2010-2013	
SECTION II. Originator must route to all affected parties before sending to Director's Office.			
REVIEWER INITIALS	ROUTING DESIGNATED	DATE	
<i>MEB</i>	M. Borba 8-12-91	2-1-10	
<i>SB</i>	S. Burdue, 8-12-91 <i>w/ edits</i>	2-1-10	
<i>HO</i>	Hoaianh	2-1-10 2-17-10 <i>5/25/10</i>	
<i>DM</i>	D. McDowell, 8-12-91	2/22/10	
<i>EG</i>	<i>See, Branch Secretary</i> <i>S. Rich ; Branch chief => Ellie</i>	5/26/10	
	8-14-90 ESTIMATES AND RESEARCH SERVICES BRANCH		
	8-17-27 LEGAL DIVISION		
	8-16-32 LEGISLATION		
	* 20-72 FISCAL SYSTEMS & ACCOUNTING BRANCH		
	8-14-600 FINANCIAL MGMT. AND CONTRACTS BR. (Budgets, Contracts, and Financial Analysis)		
FINAL APPROVALS: (Signature & Date)		<input type="checkbox"/> URGENT Please call for pick-up:	
DEPUTY DIRECTOR	DATE	NAME:	
CHIEF DEPUTY DIRECTOR	DATE	PHONE:	
DIRECTOR	DATE		